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Title of Invention	Quadrifilar Antenna
Application Number	
First Named Applica	nt: Dr. Argy Petros
Confirmation Number	or:
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Date : First Named Applica Confirmation Number	nt: Dr. Argy Petros er:

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Submitted By:	Elec. Sign.	Sign. Capacity
Dr. Argy Petros	Argy Petros	Inventor

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